

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**10/53057**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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50						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/534357

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101				1		1
102				1		1
103				1		1
104				1		1
105				1		1
106				1		1
107				1		1
108				1		1
109				1		1
110				1		1
111				1		1
112				1		1
113				1		1
114				1		1
115				1		1
116				1		1
117				1		1
118				1		1
119				1		1
120				1		1
121				1		1
122				1		1
123				1		1
124				1		1
125				1		1
126				1		1
127				1		1
128				1		1
129				1		1
130				1		1
131				1		1
132				1		1
133				1		1
134				1		1
135				1		1
136				1		1
137				1		1
138				1		1
139				1		1
140				1		1
141				1		1
142				1		1
143				1		1
144				1		1
145				1		1
146				1		1
147				1		1
148				1		1
149				1		1
150				1		1
TOTAL IND.		↓	10	↓	5	↓
TOTAL DEP.	←		111	←	114	←
TOTAL CLAIMS			121		119	

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						